## TRADE NAME CERTIFICATE

The undersigned do/does hereby certify that he/she/they ow	n, conduct and transact the
business of	
under the assumed name of and that the street address of said business is as follows:	
(business location)	
Contact address:	
Contact Phone #: E-ma	il:
and that the full name of every person conducting or transa post-office address of each said person(s) is as follows:	
Individual OR Firm Name:	(signature)
Address:	
Individual OR Firm Name:	(signature)
Address:	
STATE OF CONNECTICUT } COUNTY OF FAIRFIELD } ss: Westport	
On this the day of, 20	, before me, the undersigned officer,
personally appearedsatisfactorily proven to be the person(s) whose name(s) sub-acknowledged thathe executed the same for the purpos IN WITNESS WHEREOF I HEREUNTO SET MY HAND.	
Justice of the F	Peace/Notary Public/Town Clerk
The above and foregoing is a true copy of the original certification. Town Clerk of the Town of Westport, Connecticut.	cate on file in the office of the
ATTEST:	
Town Clerk	